

Message Text

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SUBJ: VIEWS OF THE SECRETARY OF HEALTH ON FAMILY PLANNING
AND HEALTH RESEARCH

1. THE SECRETARY OF HEALTH, MR. GIAN PRAKASH, IN A MEETING WITH DR. JAMES KING, DEPUTY DIRECTOR OIH/DHEW, AND THE EMBASSY SCIENCE ATTACHE SAID THAT THE MINISTRY IS QUITE SERIOUS IN ENFORCING INCENTIVES AND DISINCENTIVES IN THE FAMILY PLANNING PROGRAM AND WILL ENCOURAGE ALL STATES TO INSTITUTE THESE PROCEDURES. THE MINISTRY IS NOW STUDYING SEVERAL METHODS OF INCENTIVES TO BE GIVEN BY THE CENTRAL GOVERNMENT TO THE STATES IF THEY COMPLY VIGOROUSLY IN CONDUCTING THEIR FAMILY PLANNING PROGRAMS. ONE OF THE INCENTIVES WOULD BE TO INCREASE FUNDS TO STATE GOVERNMENTS FOR ECONOMIC DEVELOPMENT, EDUCATION, AND HEALTH, IF THE STATE IS SERIOUSLY CARRYING OUT FAMILY PLANNING PROGRAMS. THERE WILL ALSO BE CERTAIN TAX BENEFITS TO THE STATES. THE SECRETARY SAID THAT EVERYONE FROM THE PRIME MINISTER ON DOWN ARE NOW ACUTELY AWARE OF THE POPULATION CONTROL PROBLEM AND THIS HAS BEEN PRIMARILY BECAUSE OF THE MINISTER OF HEALTH'S RECENT CAMPAIGN TO MOTIVATE THE GOI AND PARLIAMENT TO

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TAKE FAMILY PLANNING SERIOUSLY. HE DOES NOT THINK

THE GOVERNMENT COULD OR SHOULD TAKE A TOTALITARIAN ATTITUDE TOWARD COMPULSORY STERILIZATION AT THIS STAGE. THE INCENTIVE AND DISINCENTIVE PROGRAMS IN THE STATES, ALONG WITH THE INTEGRATION OF FAMILY PLANNING INTO THE HEALTH DELIVERY SYSTEM SHOULD DECREASE THE BIRTHRATE OVER THE NEXT TEN YEARS BY TEN POINTS TO 25 PER THOUSAND BY 1985.

2. IN REGARD TO FOREIGN ASSISTANCE TO THE FAMILY PLANNING PROGRAM, THE SECRETARY SAID INDIA WAS NOW RECEIVING A GREAT DEAL OF ASSISTANCE THROUGH MULTILATERAL AGENCIES SUCH AS THE WORLD BANK AND UNFPA. BUT, CERTAIN AREAS OF RESEARCH ON FERTILITY CONTROL, SUCH AS ORAL CONTRACEPTIVE PILLS AND CONTRACEPTIVE VACCINES, ETC., WOULD BE EXCELLENT FIELDS FOR RESEARCH COOPERATION WITH THE UNITED STATES.

3. THE SECRETARY INDICATED THAT HE WAS HAPPY TO SEE THAT INDIA AND THE US WILL COOPERATE UNDER THE JOINT SUBCOMMISSION ON S&T IN POPULATION RESEARCH. HE ALSO VOICED ENTHUSIASM ABOUT HEALTH COOPERATION IN GENERAL UNDER THE JOINT SUBCOMMISSION AND NOTED THAT THE US AND INDIA HAD MANY COMMON AREAS OF INTEREST WHERE RESEARCH WOULD BE MUTUALLY BENEFICIAL AND WHERE THE EXCHANGE OF PEOPLE WOULD BE HELPFUL. HE REMARKED THAT THE MINISTRY OF HEALTH HAD GIVEN FULL RESPONSIBILITY TO DR. GOPALAN, DIRECTOR-GENERAL, ICMR TO FRAM THE MEDICAL RESEARCH PRIORITIES OF THE COUNTRY AND TO NEGOTIATE WITH THE US IN THE JOINT SUBCOMMISSION MEETING. THE ICMR, HE SAID, HAS THE BASIC RESPONSIBILITY FOR CARRYING OUT THE HEALTH RESEARCH PROGRAMS OF THE COUNTRY.

4. ON ANOTHER OCCASION LAST WEEK, THE SECRETARY TOLD THE EMBASSY SCIENCE ATTACHE THAT THE GOVERNMENT IS CALLING FOR A TOTAL PUBLIC HEALTH STRATEGY GEARED TOWARD RURAL AREAS AND BASED IN THE COMMUNITY ITSELF RATHER THAN IN THE HOSPITALS. EFFORTS WILL BE MADE TO DOVETAIL THE MODERN SYSTEMS OF MEDICINE WITH INDIAN SYSTEMS AND PROVIDE MAXIMUM COVERAGE TO RURAL POPULATIONS AT THE LOWEST POSSIBLE COST. THESE GOALS, HE SAID, CAN BE ACHIEVED BY LIMITED OFFICIAL USE

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REVISING MEDICAL EDUCATION PROGRAMS AND REDUCING THE "BRAIN DRAIN" AND ENCOURAGING RURAL COMMUNITY PRACTICES, MAKING THE TECHNOLOGY OF MEDICINE AND MEDICAL CAPU APPROPRIATE TO THE COUNTRY'S CONDITIONS AND REDUCING COST BY LOWERING PROFIT MARGINS AND USING LOCAL AVAILABLE MATERIAL. HE MENTIONED, IN PARTICULAR, THAT NEW METHODS OF HEALTH CARE DELIVERY TO THE POOR RURAL AREAS WOULD BE RECEIVING FULL MINISTRY OF HEALTH ATTENTION. ALSO, REFORMS IN

MEDICAL EDUCATION THAT WOULD CHANGE THE MEDICAL SCHOOL CURRICULUM TO CONFORM MORE WITH THE NEEDS OF THE COUNTRY ARE NOW BEING CONSIDERED. IN ADDITION, THE TRAINING OF MULTIPURPOSE HEALTH WORKERS IN THE INTEGRATED HEALTH, FAMILY PLANNING, AND NUTRITION PROGRAMS WAS NOW UNDER WAY. JOINT RESEARCH IN THESE SYSTEMS WOULD BE AN INTERESTING AREA OF COOPERATION WITH THE UNITED STATES, THE SECRETARY SAID.
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